

109TH CONGRESS
2D SESSION

H. R. 5496

To amend title XVIII of the Social Security Act to provide special treatment of certain cancer hospitals under the Medicare Program.

IN THE HOUSE OF REPRESENTATIVES

MAY 25, 2006

Mr. FERGUSON introduced the following bill; which was referred to the Committee on Ways and Means

A BILL

To amend title XVIII of the Social Security Act to provide special treatment of certain cancer hospitals under the Medicare Program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. MEDICARE TREATMENT FOR CERTAIN CANCER**
4 **HOSPITALS.**

5 (a) IN GENERAL.—Section 1886(d)(1)(B) of the So-
6 cial Security Act (42 U.S.C. 1395ww(d)(1)(B)) is amend-
7 ed—

8 (1) by striking “or” at the end of clause (iv);

9 (2) by striking the semicolon at the end of
10 clause (v) and inserting “, or”; and

1 (3) by inserting after clause (v) the following
2 new clause:

3 “(vi) a hospital that—

4 “(I) is located in a State which ranks (ac-
5 cording to the National Cancer Institute’s sta-
6 tistics published in May 2005 for 2001 and
7 2002) first among all States in the incidence of
8 prostate cancer, third in the incidence rate for
9 non-Hodgkins lymphoma, fourth in the inci-
10 dence rates for thyroid cancer and ovarian can-
11 cer, and third in the highest death rates from
12 uterine cancer and breast cancer;

13 “(II) is located in a State that, as of De-
14 cember 31, 2005, had only one center under
15 section 414 of the Public Health Service Act
16 that has been designated by the National Can-
17 cer Institute as a comprehensive center cur-
18 rently serving all 21 counties in the most dense-
19 ly populated State in the nation, serving more
20 than 70,000 patient visits annually;

21 “(III) as of December 31, 2005, served as
22 the teaching and clinical care, research and
23 training hospital for the Center described in
24 subclause (II), providing significant financial
25 and operational support to such Center;

“(IV) as of December 31, 2005, served as a core and essential element in such Center which conducts more than 130 clinical trial activities, national cooperative group studies, investigator-initiated and peer review studies and received during 2003 at least \$80,000,000 in research grant awards;

“(V) as of December 31, 2005, can demonstrate that it has been a unique and an integral component of such Center since such Center’s inception;

“(VI) as of December 31, 2005, includes dedicated patient care units organized primarily for the treatment of and research on cancer with approximately 125 beds, 75 percent of which are dedicated to cancer patients, and contains a radiation oncology department as well as specialized emergency services for oncology patients;

“(VII) as of December 31, 2003, is identified as the focus of the Center’s inpatient activities in the Center’s application as an NCI-designated comprehensive cancer center and shares the NCI comprehensive cancer designation with the Center; and

1 “(VIII) as of December 31, 2005, has been
2 recognized with a certificate of approval by the
3 American College of Surgeons Commission on
4 Cancer;”.

5 (b) CONFORMING AMENDMENT.—Section
6 1886(d)(3)(E) of such Act (42 U.S.C. 1395ww(d)(3)(E))
7 is amended by striking “clause (v)” and inserting “clauses
8 (v) and (vi)”.

9 (c) PAYMENT.—

10 (1) APPLICATION TO COST REPORTING PERI-
11 ODS.—Any classification by reason of section
12 1886(d)(1)(B)(vi) of the Social Security Act (42
13 U.S.C. 1395ww(d)(1)(B)(vi)) (as added by sub-
14 section (a)) shall apply to all cost reporting periods
15 beginning on or after January 1, 2005.

16 (2) BASE TARGET AMOUNT.—Notwithstanding
17 section 1886(b)(3)(E) of the Social Security Act (42
18 U.S.C. 1395ww(b)(3)(E), in the case of a hospital
19 described in section 1886(d)(1)(B)(vi) of the Social
20 Security Act, as added by subsection (a), such hos-
21 pital shall be permitted to resubmit the 2005 Medi-
22 care 2552 cost report incorporating a cancer hos-
23 pital sub-provider number, and apply the Medicare
24 ratio-of-cost-to-charge settlement methodology for
25 outpatient cancer services. In the case of such hos-

1 pital the PPS cancer exemption under section
2 1886(b)(3)(E)(i) of such Act for the first cost re-
3 porting period beginning on or after January 1,
4 2005, shall be the allowable operating costs of inpa-
5 tient hospital services (referred to in subclause (I) of
6 such section) for such first cost reporting period.

7 (3) DEADLINE FOR PAYMENTS.—Any payments
8 owed to a hospital as a result of this section for pe-
9 riods occurring before the date of the enactment of
10 this Act shall be made expeditiously, but in no event
11 later than 1 year after such date of enactment.

12 (d) MAINTENANCE OF EXEMPTION.—Once admitted
13 as a PPS cancer-exempt hospital, a hospital described in
14 section 1886(d)(1)(B)(vi) of the Social Security Act shall
15 retain that status as long as the Center referred to in such
16 section remains a comprehensive cancer center.

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